



Borough of Montvale

12 Mercedes Drive
Montvale, NJ 07645
(201) 391-5732
(201) 391-1312 fax
www.montvale.org

Building Department Generator Form

Jeffrey Fette
Construction Official
Zoning Official

Cynthia Petersen
Technical Assistant

INFORMATION REQUIRED FOR ALL GENERATOR APPLICATIONS

1. A survey is required showing the location and setbacks of the generator

ELECTRIC INFORMATION REQUIRED FOR ALL GENERATORS

1. The specifications of the generator and transfer switch must be provided
2. Show location of electric panel and transfer switch
3. A line diagram to show wire size, conduit size, length for feeder and control wires
4. Residential load calculations

PLUMBING INFORMATION REQUIRED FOR ALL GENERATORS

1. Gas line shall run from generator, without other take offs, directly to a 1.25" minimum tee at the gas meter.
2. The pipe diameter shall be taken from the I.F.G.C. 2009 table 402.4(1) (if metallic) which can accommodate the full load capacity of the generator.
3. Provide a diagram of this gas line showing the materials to be used, lengths and size for each section.
4. Other piping arrangements are permitted with sizing calculations submitted for the entire gas service system (old and new) by "Longest Length Method" or other approved method.
5. The meter and / or gas service may have to be upgraded per the gas utility provider requirements.

***A permit will not be issued until the above information is received and approved.

SIGN REQUIREMENTS FOR ALL GENERATORS

A permanently engraved sign that says **"2nd Power Source Available / Generator"** must be obtained for all generator installations. The sign should be red with white lettering - lettering should be 3/4" high (minimum) and mounted **on the house next to the meter.**

***The final electrical inspection will not be approved without the above sign properly installed.

***The electrical contractor **must** be present for the final inspection.

CORRUGATED STAINLESS STEEL TUBING (CSST)

When installing CSST piping, an ELECTRICAL SUB CODE must be submitted for Bonding.

Block _____ Lot _____ Permit # _____

Work Site Address _____

Contractor _____

I will be using CCST _____ Name _____

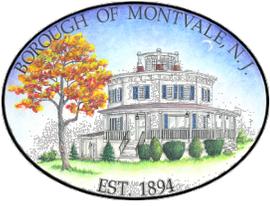
Signature _____

Date _____

I will not be using CCST _____ Name _____

Signature _____

Date _____



Borough of Montvale

12 Mercedes Drive
Montvale, NJ 07645
(201) 391-5732
(201) 391-1312 fax
www.montvale.org

Building Department
ZONING PERMIT APPLICATION

Jeffrey Fette
Construction Official
Zoning Official
Cynthia Petersen
Technical Assistant

ZONING PERMIT APPLICATION

Permit # _____

Block _____ Lot _____ Zone _____

Property Address: _____

Owner of Property: _____

Address: _____

Home Telephone _____ Daytime Phone _____ Cell Phone _____

Name of Contractor or Person responsible for work, if other than above

Address

Contact _____ License # _____

AUTHORIZATION: ANYONE OTHER THAN ABOVE OWNER IS MAKING THIS APPLICATION; THE FOLLOWING AUTHORIZATION MUST BE EXECUTED:

TO THE ZONING OFFICIAL OF THE BOROUGH OF MONTVALE:

Name of Designee

Is hereby authorized to act on behalf of this application

Date

Signature of Owner

ZONING PERMIT REQUEST

PLEASE CHECK ALL THAT APPLY: A current survey showing proposed locations and setbacks are required for all permit applications

Accessory Structure (100 sq. ft. or less) (Plans required) Fee - \$100.00

Signs – (Plans required showing sizes and colors)

Application Fee - \$150.00

Refacing (each side) Fee - \$50.00

Temporary Sign (Limit - 6 months) - Expires _____ Fee - \$100.00

Banners (Limit - 2 weeks) Fee - \$75.00

Temporary Trailer (Limit one year) Fee - \$100.00

Temporary Trailer (Limit two weeks) - Expires _____ Fee - \$25.00

Fence (ALL FENCES EXCEPT POOL FENCES – POOL FENCES NEED UCC PERMIT) Fee - \$50.00

Retaining Walls (Plans required) Fee - \$100.00

4 ft. or less

Over 4 ft. (REQUIRES BUILDING PERMIT AND ENGINEERING APPROVAL)

Site Work Permit (Survey required) Fee - \$50.00

Driveways

Berms

Patio / Pavers

Filling (less than 50 cu. ft.)

Clearing

Generator

Other than listed above:

Jeffrey Fette / Zoning Official
201-391-5732, ext. 223

Approved / Denied

Date

COMMENTS:

Amount Paid: _____ Check # _____ Received by: _____ Date: _____